



PART B - FEE(S) TRANSMITTAL

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7590

02/26/2002

STERNE KESSLER GOLDSTEIN AND FOX PLLC
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WASHINGTON, DC 200053934

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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/448,867 | 11/24/1999 | F Richard BRINGHURST | 0609.4640001 | 5545 |

TITLE OF INVENTION: MODIFIED HUMAN PARATHYROID HORMONE

| TOTAL CLAIMS | APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|--------------|----------------|--------------|-----------|-----------------|------------------|------------|
| 14 | nonprovisional | NO | \$1280 | \$0 | \$1280 | 05/28/2002 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| WEGERT, SANDRA L | 1647 | 530-351000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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Sterne, Kessler,
Goldstein & Fox P.L.L.C.
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The General Hospital Corporation

Boston, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

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